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Bib Data Sheet

CONFIRMATION NO. 4334

|   |   |                               |   |   |
|---|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>09/833,496  | <b>FILING DATE</b><br>04/11/2001<br><b>RULE</b>   | <b>CLASS</b><br>530           | <b>GROUP ART UNIT</b><br>1627   | <b>ATTORNEY DOCKET NO.</b><br>09820.149 |
| <b>APPLICANTS</b><br>Samuel H. Gellman, Madison, WI;<br>Daniel H. Appella, Evanston, IL;<br>Hee-Seung Lee, Madison, WI;<br>Paul LePlae, Madison, WI;<br>Emilie Porter, Madison, WI;<br>Xifang Wang, Madison, WI;<br>Matthew Woll, Madison, WI;  |   |                               |   |   |
| <b>** CONTINUING DATA *****</b><br>THIS APPLICATION IS A CIP OF 09/464,212 12/15/1999<br>WHICH IS A DIV OF 09/034,509 03/04/1998 PAT 6,060,585<br>WHICH CLAIMS BENEFIT OF 60/039,905 03/04/1997   |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b><br><b>** 06/08/2001</b>   |   |                               |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>WI | <b>SHEETS DRAWING</b><br>19   | <b>TOTAL CLAIMS</b><br>29               |
| <b>INDEPENDENT CLAIMS</b><br>2  |   |                               |   |   |
| <b>ADDRESS</b><br>25005   |   |                               |   |   |
| <b>TITLE</b><br>Beta-amino acids  |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>501   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |